

Department of Behavioral Health

www.dbh.dc.gov

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Table RM0-1

Description	FY 2019 Actual	FY 2020 Actual	FY 2021 Approved	FY 2022 Approved	% Change from FY 2021
OPERATING BUDGET	\$298,707,192	\$318,729,663	\$307,647,505	\$356,134,948	15.8
FTEs	1,413.9	1,367.6	1,395.9	1,454.6	4.2
CAPITAL BUDGET	\$663,781	\$63,760	\$7,710,000	\$4,420,383	-42.7
FTEs	0.0	0.0	0.0	0.0	N/A

The mission of the Department of Behavioral Health (DBH) is to support prevention, treatment, resiliency, and recovery for District residents with mental health and substance use disorders through the delivery of high-quality, integrated services.

Summary of Services

The DBH will: (1) ensure that every individual seeking services is assessed for both mental health and substance use disorder needs, (2) increase the capacity of the provider network to treat co-occurring disorders, (3) establish and measure outcomes for individuals with co-occurring mental health and substance use disorders as well as single illnesses with recovery as the goal, and (4) enhance provider monitoring to ensure high quality service.

The agency's FY 2022 approved budget is presented in the following tables:

FY 2022 Approved Gross Funds Operating Budget and FTEs, by Revenue Type

Table RM0-2 contains the approved FY 2022 budget by revenue type compared to the FY 2021 approved budget. It also provides FY 2019 and FY 2020 actual data.

Table RM0-2

(dollars in thousands)

Appropriated Fund	Dollars in Thousands						Full-Time Equivalents					
	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021	% Change*	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021	% Change
GENERAL FUND												
Local Funds	248,557	273,265	272,004	287,359	15,355	5.6	1,229.1	1,158.2	1,228.2	1,229.8	1.7	0.1
Dedicated Taxes	0	0	200	200	0	0.0	0.0	0.0	0.0	0.0	0.0	N/A

Table RM0-2

(dollars in thousands)

	Dollars in Thousands						Full-Time Equivalents					
	Actual	Actual	Approved	Approved	Change	%	Actual	Actual	Approved	Approved	Change	%
Appropriated Fund	FY 2019	FY 2020	FY 2021	FY 2022	FY 2021	Change*	FY 2019	FY 2020	FY 2021	FY 2022	FY 2021	Change
Special Purpose												
Revenue Funds	2,289	2,315	2,650	2,687	37	1.4	16.2	15.7	16.2	16.2	0.0	0.0
TOTAL FOR												
GENERAL FUND	250,846	275,580	274,855	290,246	15,391	5.6	1,245.4	1,174.0	1,244.4	1,246.1	1.7	0.1
FEDERAL												
RESOURCES												
Federal Payments	0	0	0	10,221	10,221	N/A	0.0	0.0	0.0	55.0	55.0	N/A
Federal Grant Funds	28,551	27,605	15,135	38,853	23,718	156.7	82.8	113.5	77.6	88.6	11.0	14.2
Federal Medicaid												
Payments	5,455	2,603	2,991	2,858	-134	-4.5	5.0	5.0	5.0	4.0	-1.0	-20.0
TOTAL FOR												
FEDERAL												
RESOURCES	34,005	30,208	18,126	51,931	33,805	186.5	87.8	118.5	82.6	147.6	65.0	78.7
PRIVATE FUNDS												
Private Grant Funds	323	262	446	486	40	9.0	1.0	0.0	0.0	0.0	0.0	N/A
Private Donations	109	54	161	161	0	0.0	0.0	0.0	0.0	0.0	0.0	N/A
TOTAL FOR												
PRIVATE FUNDS	432	316	607	647	40	6.6	1.0	0.0	0.0	0.0	0.0	N/A
INTRA-DISTRICT												
FUNDS												
Intra-District Funds	13,424	12,626	14,059	13,310	-749	-5.3	79.8	75.1	68.9	61.0	-7.9	-11.5
TOTAL FOR												
INTRA-DISTRICT												
FUNDS	13,424	12,626	14,059	13,310	-749	-5.3	79.8	75.1	68.9	61.0	-7.9	-11.5
GROSS FUNDS	298,707	318,730	307,648	356,135	48,487	15.8	1,413.9	1,367.6	1,395.9	1,454.6	58.8	4.2

*Percent change is based on whole dollars.

Note: If applicable, for a breakdown of each Grant (Federal and Private), Special Purpose Revenue type and Intra-District agreement, please refer to **Schedule 80 Agency Summary by Revenue Source** in the **FY 2022 Operating Appendices** located on the Office of the Chief Financial Officer's website.

FY 2022 Approved Operating Budget, by Comptroller Source Group

Table RM0-3 contains the approved FY 2022 budget at the Comptroller Source Group (object class) level compared to the FY 2021 approved budget. It also provides FY 2019 and FY 2020 actual expenditures.

Table RM0-3

(dollars in thousands)

	Actual	Actual	Approved	Approved	Change	Percentage
Comptroller Source Group	FY 2019	FY 2020	FY 2021	FY 2022	from	Change*
11 - Regular Pay - Continuing Full Time	106,224	112,364	115,076	123,326	8,250	7.2
12 - Regular Pay - Other	6,494	6,717	5,905	6,421	516	8.7
13 - Additional Gross Pay	5,486	7,133	3,995	3,995	0	0.0
14 - Fringe Benefits - Current Personnel	28,113	29,292	32,171	33,716	1,546	4.8
15 - Overtime Pay	4,921	6,382	1,521	1,521	0	0.0
SUBTOTAL PERSONAL SERVICES (PS)	151,238	161,888	158,667	168,980	10,313	6.5
20 - Supplies and Materials	4,554	5,666	6,376	6,508	132	2.1

Table RM0-3

(dollars in thousands)

Comptroller Source Group	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021	Percentage Change*
30 - Energy, Communication and Building Rentals	1,458	1,496	1,889	1,448	-442	-23.4
31 - Telecommunications	722	716	715	761	46	6.4
32 - Rentals - Land and Structures	6,275	6,430	6,964	7,412	448	6.4
34 - Security Services	3,142	2,878	4,993	5,013	20	0.4
35 - Occupancy Fixed Costs	219	680	885	418	-467	-52.7
40 - Other Services and Charges	21,089	22,744	18,042	26,988	8,946	49.6
41 - Contractual Services - Other	32,170	30,864	29,364	35,231	5,867	20.0
50 - Subsidies and Transfers	77,213	85,053	79,313	100,793	21,480	27.1
70 - Equipment and Equipment Rental	627	314	438	2,582	2,144	489.1
SUBTOTAL NONPERSONAL SERVICES (NPS)	147,469	156,842	148,980	187,155	38,175	25.6
GROSS FUNDS	298,707	318,730	307,648	356,135	48,487	15.8

*Percent change is based on whole dollars.

FY 2022 Approved Operating Budget and FTEs, by Division/Program and Activity

Table RM0-4 contains the approved FY 2022 budget by division/program and activity compared to the FY 2021 approved budget. It also provides FY 2019 and FY 2020 actual data. For a more comprehensive explanation of divisions/programs and activities, please see the Division/Program Description section, which follows the table.

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021
(1000) AGENCY MANAGEMENT										
(1010) Personnel	1,777	1,749	1,830	1,854	25	15.0	14.3	15.0	15.0	0.0
(1015) Training and Employee Development	432	259	264	270	6	3.0	1.9	2.0	2.0	0.0
(1017) Labor Relations	472	434	494	498	3	3.0	2.9	3.0	3.0	0.0
(1030) Property Management	1,217	796	1,051	1,055	4	3.9	4.1	3.0	3.0	0.0
(1040) Information Technology	0	0	5,180	7,856	2,676	0.0	0.0	24.0	24.0	0.0
(1050) Financial Management-Agency	2,211	1,845	2,354	2,322	-32	17.9	19.6	17.0	17.0	0.0
(1088) Claims Administration	1,051	813	647	662	15	10.1	5.1	5.0	5.0	0.0
(1089) Health Information Management	742	798	766	0	-766	8.9	7.0	9.0	0.0	-9.0
(1090) Performance Management	4	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(1091) Office of Administration Operations	10,355	10,015	12,472	13,140	668	9.0	5.7	3.0	3.0	0.0
(1092) Records Management	0	0	0	777	777	0.0	0.0	0.0	9.0	9.0
SUBTOTAL (1000) AGENCY MANAGEMENT	18,261	16,709	25,058	28,433	3,375	70.8	60.6	81.0	81.0	0.0
(100F) DBH FINANCIAL OPERATIONS										
(110F) DBH Budget Operations	798	736	959	933	-26	5.0	4.8	5.0	5.0	0.0
(120F) DBH Accounting Operations	932	875	949	947	-2	9.0	8.6	9.0	9.0	0.0
(130F) DBH Fiscal Officer	305	312	348	350	2	2.0	1.9	2.0	2.0	0.0
SUBTOTAL (100F) DBH FINANCIAL OPERATIONS	2,035	1,924	2,256	2,230	-26	16.1	15.3	16.0	16.0	0.0

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021
(1800) BEHAVIORAL HEALTH AUTHORITY										
(1810) Office of the Director/ Chief Executive Officer	2,458	1,655	1,926	2,295	369	8.0	10.7	11.0	12.0	1.0
(1820) Consumer and Family Affairs	2,075	1,858	1,750	1,684	-66	9.9	9.8	10.0	10.0	0.0
(1885) Office of Ombudsman	275	285	430	288	-141	3.0	3.0	3.0	2.0	-1.0
(1888) Legal Services	789	819	884	900	16	4.5	4.3	4.5	4.5	0.0
(1889) Legislative and Public Affairs	920	558	634	649	15	7.9	4.9	5.0	5.0	0.0
SUBTOTAL (1800) BEHAVIORAL HEALTH AUTHORITY	6,517	5,174	5,624	5,817	192	33.4	32.7	33.5	33.5	0.0
(3800) ST. ELIZABETHS HOSPITAL										
(3805) Office of the Chief Executive	1,341	356	586	494	-91	2.0	1.9	3.0	2.0	-1.0
(3810) Office of Clinical and Medical Services - SEH	17,585	22,375	23,679	25,009	1,330	116.3	113.0	116.0	116.0	0.0
(3815) Engineering and Maintenance -SEH	3,757	5,310	5,260	4,539	-721	19.1	18.1	19.0	19.0	0.0
(3820) Fiscal and Support Services -SEH	939	475	753	731	-22	2.0	1.9	2.5	2.5	0.0
(3828) Quality and Data Management	1,401	1,502	1,458	1,495	36	11.0	10.5	11.0	11.0	0.0
(3830) Housekeeping - SEH	3,055	3,189	2,991	2,986	-5	48.5	45.7	47.0	47.0	0.0
(3835) Materials Management - SEH	1,496	1,465	1,621	1,635	14	8.0	7.6	8.0	8.0	0.0
(3845) Nursing - SEH	46,676	52,005	45,337	46,635	1,298	437.9	416.8	433.8	426.3	-7.5
(3850) Nutritional Services SEH	3,698	3,911	3,955	3,877	-78	28.2	26.8	28.1	27.1	-1.0
(3860) Security and Safety - SEH	5,126	5,160	4,415	4,368	-46	32.3	31.8	30.0	30.0	0.0
(3865) Transportation and Grounds - SEH	819	670	791	8,320	7,528	5.0	4.8	5.0	62.0	57.0
(3870) Office of the Chief of Staff - SEH	26	29	110	110	0	0.0	0.0	0.0	0.0	0.0
(3875) Office of the Chief Operating Officer - SEH	905	928	1,022	1,040	19	10.0	9.5	10.0	10.0	0.0
(3880) Office of Chief Clinical Officer - SEH	11,173	11,552	12,406	12,247	-159	115.4	110.1	110.0	111.0	1.0
SUBTOTAL (3800) ST. ELIZABETHS HOSPITAL	97,997	108,925	104,383	113,486	9,104	835.8	798.7	823.5	872.0	48.5
(4800) BEHAVIORAL HEALTH SERVICES AND SUPPORTS										
(4830) Adult Services - Forensic - BHSS	-3	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(4860) Children and Youth - BHSS	1	0	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (4800) BEHAVIORAL HEALTH SERVICES AND SUPPORTS	-2	0	0	0	0	0.0	0.0	0.0	0.0	0.0
(4900) ACCOUNTABILITY										
(4905) Office of Accountability	286	145	49	37	-12	1.1	1.0	0.1	0.0	-0.1
(4910) Investigations	465	442	517	521	5	4.0	3.8	4.0	4.0	0.0
(4920) Licensure	546	600	575	585	10	4.0	3.8	4.0	4.0	0.0
(4930) Certification	1,230	1,718	1,060	1,075	16	8.9	7.6	8.0	8.0	0.0
(4940) Program Integrity	1,779	982	1,451	1,408	-42	14.0	12.4	11.0	11.0	0.0
SUBTOTAL (4900) ACCOUNTABILITY	4,307	3,887	3,650	3,627	-24	32.1	28.8	27.1	27.0	-0.1

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021
(5800) CLINICAL SERVICES DIVISION										
(5810) Office of the Chief Clinical Officer	5,541	6,749	7,004	6,459	-546	9.0	19.1	21.0	21.0	0.0
(5830) Behavioral Health Services	901	825	649	613	-36	7.4	6.8	6.0	6.0	0.0
(5831) Behavioral Health Services - Adult	3,614	3,448	3,556	0	-3,556	26.2	23.2	21.4	0.0	-21.4
(5832) Behavioral Health Services - Child	2,108	1,704	2,587	0	-2,587	16.5	10.7	17.0	1.0	-16.0
(5836) Behavioral Health Services - Pharmacy	1,281	1,364	1,410	1,433	23	5.9	5.2	5.0	5.0	0.0
(5840) Comprehensive Psych Emergency Program - CPEP	1,176	1,166	1,244	6,510	5,266	8.2	7.7	8.0	47.5	39.5
(5841) Psychiatric Emergency Services - CPEP	4,844	6,633	6,031	0	-6,031	44.3	40.3	40.5	0.0	-40.5
(5842) Homeless Outreach / Mobile Crisis - CPEP	4,923	5,092	5,412	2	-5,410	26.3	26.1	26.2	0.0	-26.2
(5870) Access Helpline	1,895	1,895	1,756	0	-1,756	18.9	17.9	17.0	0.0	-17.0
(5880) Forensics	5,606	4,542	5,267	5,110	-157	33.1	26.7	29.0	32.0	3.0
(5883) Disaster Behavioral Health & Support Services	0	0	0	896	896	0.0	0.0	0.0	3.0	3.0
(5890) Assessment and Referral Center (ARC)	2,147	2,117	2,246	2,186	-59	23.6	33.6	22.0	21.0	-1.0
SUBTOTAL (5800) CLINICAL SERVICES DIVISION	34,037	35,535	37,162	23,209	-13,953	219.4	217.2	213.2	136.5	-76.7
(5900) SYSTEM TRANSFORMATION										
(5905) Office of System Transformation	817	614	871	0	-871	4.9	5.0	5.0	0.0	-5.0
(5910) Info Systems Innovation/Data Analytics	3,191	2,952	0	0	0	4.0	3.9	0.0	0.0	0.0
(5911) ISIDA - Data/Performance Mgmt	1,686	2,127	2,230	0	-2,230	13.9	12.6	15.0	0.0	-15.0
(5912) ISIDA - Information Systems	1,556	1,854	0	0	0	12.9	12.7	0.0	0.0	0.0
(5913) ISIDA - Technology Infrastructure	790	887	0	0	0	9.0	7.6	0.0	0.0	0.0
(5920) Strategic Mgmt and Policy	2,889	1,691	1,920	0	-1,920	4.0	2.9	3.0	0.0	-3.0
(5930) Network Development	1,478	1,336	1,414	0	-1,414	10.0	10.2	10.0	0.0	-10.0
(5940) Training Institute	597	699	769	0	-769	5.0	4.8	5.0	0.0	-5.0
SUBTOTAL (5900) SYSTEM TRANSFORMATION	13,003	12,160	7,203	0	-7,203	63.8	59.7	38.0	0.0	-38.0
(6500) ADULT/TRANSITIONAL YOUTH SERVICES										
(6502) Behavioral Health Services MH/SUD	0	0	0	5,494	5,494	0.0	0.0	0.0	31.4	31.4
(6504) Provider Relations	0	0	0	1,394	1,394	0.0	0.0	0.0	10.0	10.0
(6505) Co-Located Services	0	0	0	478	478	0.0	0.0	0.0	4.0	4.0
(6506) Residential Support & Continuity of Services	0	0	0	574	574	0.0	0.0	0.0	4.0	4.0
(6507) Housing Support Services	0	0	0	30,093	30,093	0.0	0.0	0.0	3.0	3.0
(6508) Community Response Team	0	0	0	4,576	4,576	0.0	0.0	0.0	26.2	26.2
(6509) State Opioid Response Program	0	0	0	30,373	30,373	0.0	0.0	0.0	28.0	28.0
(6510) Assessment & Referral Center	0	0	0	834	834	0.0	0.0	0.0	1.0	1.0
(6511) Access Helpline	0	0	0	1,780	1,780	0.0	0.0	0.0	17.0	17.0
(6512) Specialty Services	0	0	0	3,922	3,922	0.0	0.0	0.0	13.0	13.0
(6513) Substance Use Disorder Treatment Services	0	0	0	11,088	11,088	0.0	0.0	0.0	0.0	0.0

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021
(6514) MHRS Local Only	0	0	0	11,313	11,313	0.0	0.0	0.0	0.0	0.0
(6515) Behavioral Health Rehab. - Local Match	0	0	0	11,300	11,300	0.0	0.0	0.0	0.0	0.0
(6516) Gambling Addiction Treatment & Research	0	0	0	200	200	0.0	0.0	0.0	0.0	0.0
(6517) Implementation of Drug Treatment Choice	0	0	0	360	360	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (6500)										
ADULT/TRANSITIONAL YOUTH SERVICES	0	0	0	113,779	113,779	0.0	0.0	0.0	137.7	137.7
(6600)										
CHILD/ADOLESCENT/FAMILY SERVICES										
(6601) Child/Adolescent/Family Services Admin	0	0	0	1,946	1,946	0.0	0.0	0.0	8.0	8.0
(6610) Behavioral Health Services MH/SUD	0	0	0	2,072	2,072	0.0	0.0	0.0	15.0	15.0
(6615) SUD Prevention & Treatment	0	0	0	20,656	20,656	0.0	0.0	0.0	3.0	3.0
(6620) School Based Behavioral Health Services	0	0	0	29,610	29,610	0.0	0.0	0.0	64.0	64.0
(6625) Crisis Services	0	0	0	300	300	0.0	0.0	0.0	0.0	0.0
(6630) Court Assessment	0	0	0	510	510	0.0	0.0	0.0	5.0	5.0
(6635) Early Childhood Services	0	0	0	4,153	4,153	0.0	0.0	0.0	22.0	22.0
(6640) Specialty Services	0	0	0	583	583	0.0	0.0	0.0	5.0	5.0
SUBTOTAL (6600)										
CHILD/ADOLESCENT/FAMILY SERVICES	0	0	0	59,831	59,831	0.0	0.0	0.0	122.0	122.0
(6700) POLICY, PLANNING, & EVALUATION ADMIN										
(6702) Strategic Planning & Policy	0	0	0	1,115	1,115	0.0	0.0	0.0	7.0	7.0
(6703) Training Institute	0	0	0	2,996	2,996	0.0	0.0	0.0	21.0	21.0
(6704) Behavioral Health Block Grant Program	0	0	0	1,612	1,612	0.0	0.0	0.0	1.0	1.0
SUBTOTAL (6700) POLICY, PLANNING, & EVALUATION ADMIN	0	0	0	5,723	5,723	0.0	0.0	0.0	29.0	29.0
(6900) COMMUNITY SERVICES										
(6901) Community Services Administration	0	213	230	0	-230	0.0	0.0	0.0	0.0	0.0
(6905) Office of Community Services	2,441	1,768	1,769	0	-1,769	5.9	5.9	7.0	0.0	-7.0
(6910) Prevention and Early Intervention	1,156	1,074	1,088	0	-1,088	3.1	2.9	3.0	0.0	-3.0
(6911) Prevention/Early Intervention - Early Childhood	1,096	2,192	3,968	0	-3,968	9.1	8.6	22.0	0.0	-22.0
(6912) Prevention/Early Intervention - Sch Mental Health	10,316	15,819	21,796	0	-21,796	59.3	67.6	71.7	0.0	-71.7
(6913) Prevention Substance Use Disorder	3,615	1,755	2,003	0	-2,003	10.9	13.2	11.0	0.0	-11.0
(6914) Gambling Treatment and Intervention	0	0	200	0	-200	0.0	0.0	0.0	0.0	0.0
(6920) Specialty Care	3,889	2,284	2,398	0	-2,398	1.9	3.3	3.0	0.0	-3.0
(6921) Specialty Care - Community-Based Service	2,616	2,316	2,441	0	-2,441	14.6	15.2	12.0	0.0	-12.0

Table RM0-4

(dollars in thousands)

Division/Program and Activity	Dollars in Thousands					Full-Time Equivalents				
	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021	Actual FY 2019	Actual FY 2020	Approved FY 2021	Approved FY 2022	Change from FY 2021
(6922) Specialty Care - New Initiatives	11,989	16,156	2,708	0	-2,708	7.1	8.6	4.0	0.0	-4.0
(6930) Linkage and Assessment	2,347	2,053	2,312	0	-2,312	2.9	4.0	3.0	0.0	-3.0
(6931) Linkage and Assessment/Assessment Center	488	472	503	0	-503	5.0	4.8	5.0	0.0	-5.0
(6932) Linkage and Assessment/Co-Located Programs	613	737	584	0	-584	6.0	4.8	5.0	0.0	-5.0
(6933) Linkage and Assessment - PRTF	571	594	576	0	-576	5.0	4.8	5.0	0.0	-5.0
(6940) Housing Development	27,417	29,509	29,332	0	-29,332	7.6	7.1	8.0	0.0	-8.0
(6950) Residential Support Services/Care Continuity	508	551	569	0	-569	4.2	3.9	4.0	0.0	-4.0
(6960) Implementation of Drug Treatment Choice	13,891	14,284	11,088	0	-11,088	0.0	0.0	0.0	0.0	0.0
(6970) Behavioral Health Rehab	10,759	13,209	11,313	0	-11,313	0.0	0.0	0.0	0.0	0.0
(6980) Behavioral Health Rehab - Local Match	28,839	29,434	27,434	0	-27,434	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (6900) COMMUNITY SERVICES	122,551	134,420	122,311	0	-122,311	142.6	154.6	163.7	0.0	-163.7
(9220) DEPARTMENT OF MENTAL HEALTH - P-CARD										
(9221) Department of Mental Health - PCard	1	5	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (9220) DEPARTMENT OF MENTAL HEALTH - P-CARD	1	5	0	0	0	0.0	0.0	0.0	0.0	0.0
(9960) YR END CLOSE										
No Activity Assigned	0	-10	0	0	0	0.0	0.0	0.0	0.0	0.0
SUBTOTAL (9960) YR END CLOSE	0	-10	0	0	0	0.0	0.0	0.0	0.0	0.0
TOTAL APPROVED OPERATING BUDGET	298,707	318,730	307,648	356,135	48,487	1,413.9	1,367.5	1,395.9	1,454.6	58.8

(Change is calculated by whole numbers and numbers may not add up due to rounding)

Note: For more detailed information regarding the approved funding for the activities within this agency's programs, please see **Schedule 30-PBB Program Summary by Activity** in the **FY 2022 Operating Appendices** located on the Office of the Chief Financial Officer's website. "No Activity Assigned" indicates budget or actuals that are recorded at the division/program level.

Division Description

The Department of Behavioral Health operates through the following 9 divisions:

Behavioral Health Authority – plans for and develops mental health and substance use disorders (SUD) services; ensures access to services; monitors the service system; supports service providers by operating DBH's Fee for Service (FFS) system; provides grant or contract funding for services not covered through the FFS system; regulates the providers within the District's public behavioral health system; and identifies the appropriate mix of programs, services, and supports necessary to meet the behavioral health needs of District residents.

This division contains the following 5 activities:

- **Office of the Director/Chief Executive Officer** – leads management and oversight of the public behavioral health system; directs the design, development, communication, and delivery of behavioral health services and supports; and identifies approaches to enhance access to services that support recovery and resilience;
- **Consumer and Family Affairs** – promotes and protects the rights of individuals with behavioral health disorders; encourages and facilitates consumer and client and family leadership of treatment and recovery plans; and ensures consumer and client voice in the development of the behavioral health system. The Administration also promotes consumer and client leadership, manages the peer certification training, and provides expertise on the consumer and client perspective and is made up of the following teams: Peer Support, Consumer Engagement, Consumer Rights, Quality Improvement, and Saint Elizabeths;
- **Office of Ombudsman** – identifies and helps consumers and clients resolve problems, complaints and grievances through existing processes; educates on available services and helps to maximize outreach; refers individuals when appropriate to other District agencies for assistance; and comments on behalf of residents on District behavioral health policy, regulations, and legislation;
- **Legal Services** – provides legal advice to the Director on all aspects of DBH's operations and activities; drafts, researches and/or reviews legislation, regulations, and policies affecting DBH's mission and programs; and formulates strategic advice on DBH program development and compliance and oversight activities; and
- **Legislative and Public Affairs** – manages legislative initiatives and acts as the liaison to the District Council. Also, coordinates the agency's public education, internal and external communications, and public engagement and outreach initiatives; facilitates responses to constituent complaints and service requests; and provides information and support for special projects.

Saint Elizabeths Hospital (SEH) – provides inpatient psychiatric, medical, and psycho-social person-centered treatment to adults to support their recovery and return to the community. The hospital's goal is to maintain an active treatment program that fosters individual recovery and independence as much as possible. The hospital is licensed by the District's Department of Health and meets all the conditions of participation promulgated by the federal Centers for Medicare and Medicaid Services.

This division contains the following 14 activities:

- **Office of the Chief Executive** – provides overall executive management and leadership for all services and departments of Saint Elizabeths;
- **Office of Clinical and Medical Services – SEH** – provides the clinical, operational, strategic, and cultural leadership necessary to deliver care that is high-value (in terms of cost, quality and patient experience) to support their recovery and reintegration into the community;
- **Engineering and Maintenance – SEH** – provides maintenance and repairs to ensure a functional, safe, and secure facility to maximize the benefits of the therapeutic environment;
- **Fiscal and Support Services – SEH** – provides for the formulation, execution, and management of the hospital's budget, billing and revenue operations; approves and finances all requests for procurements; and oversees the overall financial integrity of the Hospital to ensure the appropriate collection, allocation, utilization, and control of resources;
- **Quality and Data Management** – provides quality improvement utilizing performance improvement techniques; uses data and research to guide clinical practices; provides oversight of reporting functions; and manages the reporting functions from the electronic medical record;
- **Housekeeping – SEH** – maintains a clean and sanitized environment to enhance the therapeutic environment and level of clinical performance;
- **Materials Management – SEH** – receives and delivers materials, supplies, and postal and laundry services; maintains an inventory of goods; replenishes stock; and performs electronic receiving for all goods and services;

- **Nursing Services – SEH** – provides active treatment and comprehensive, high quality 24-hour nursing care through a recovery-based therapeutic program; establishes the training curriculum for all levels of hospital staff; and ensures compliance with training programs for clinical and clinical support staff to maintain the health and safety of patients and staff;
- **Nutritional Services – SEH** – provides optimum nutrition and food services, medical nutrition therapy, and nutrition education services in a safe and sanitary environment;
- **Security and Safety – SEH** – provides a safe and secure facility for patients, visitors, and staff to support a therapeutic environment;
- **Transportation and Grounds – SEH** – manages the resources, administrative functions, contracts, and personnel; and provides transportation and maintenance services, including solid and medical waste disposal, and snow and ice removal;
- **Office of the Chief of Staff – SEH** – primarily responsible for the organization, ongoing management and oversight of key hospital administrative functions; regularly interacts and coordinates with medical staff and executive leadership; and serves as liaison with external partners including the Department of Corrections, DC Superior Court, and the District of Columbia Hospital Association;
- **Office of the Chief Operating Officer – SEH** – provides the operational, strategic, and cultural leadership necessary to plan, direct, and manage major administrative functions. This ensures the provision of high quality services while also meeting the needs of individuals in care and external stakeholders. The Chief Operating Officer regularly interacts and coordinates with finance, information systems, human resources, performance improvement, and risk management; and
- **Office of the Chief Clinical Officer – SEH** – provides clinical leadership and interdisciplinary treatment teams; and ensures the provision of social work services, treatment programs, rehabilitation services, utilization review, and volunteer services.

Accountability Division – oversees provider certification, mental health community residence facility licensure, program integrity, quality improvement, major investigations, incident management, claims audits, and compliance monitoring. Issues annual Medicaid and local repayment demand letters, annual quality reviews, and annual provider scorecards.

This division contains the following 5 activities:

- **Office of Accountability** – leads the Accountability Division by providing oversight and management of all of the agency’s certification, licensure, incident management, and program integrity activities;
 - **Incident Management and Investigations** - conducts major investigations of sentinel events and major unusual incidents, presents a disposition of the matter, and develops the final investigate report submitted to the agency Director, General Counsel, and other appropriate parties to ensure the needs and treatment goals of individuals in care are identified and addressed.
 - **Licensure** – reviews and processes applications for licensure for Mental Health Community Residence Facilities (MHCRF), monitors MHCRF operators’ compliance with agency regulations and policies, and generates and enforces statements of deficiencies and corrective action plans when necessary;
 - **Certification** – reviews and processes applications for certification and recertification for behavioral health providers, monitors provider compliance with agency certification regulations and policies, and generates and enforces statements of deficiencies and corrective action plans when necessary; and
- Program Integrity** – provides oversight of certified providers through audits and reviews to ensure that they meet or exceed service delivery and documentation standards for mental health rehabilitation and substance use disorder services, and that they comply with agency policies and procedures and applicable District and federal laws and regulations.

Clinical Services Division – provides person-centered, culturally competent outpatient psychiatric treatment and supports to children, youth, and adults to support their recovery; and coordinates disaster and emergency mental health programs.

This division contains the following 8 activities:

- **Office of the Chief Clinical Officer** – supervises and sets clinical care standards for provision of the full range of substance use, mental health and gambling addiction services throughout the agency and public behavioral health system for children, youth, and adults; oversees community hospitals that treat agency consumers on an involuntary basis; serves as the petitioner in guardianship cases.
- **Behavioral Health Services** – directs and manages mental health services at two agency-operated locations;
- **Behavioral Health Services – Pharmacy** –provides psychiatric medications for residents enrolled in the public behavioral health system who are uninsured and unable to pay for medications;
- **Comprehensive Psychiatric Emergency Program (CPEP)** – provides emergency stabilization services for adults 18 years of age and older experiencing a mental health crisis, including immediate and extended observation care to individuals who present in crisis, as well as services in the community; and participates in the District’s cold weather alert response. Individuals may be voluntary or involuntary status;
- **Homeless Outreach/Mobile Crisis (CPEP)** – Homeless Outreach connects homeless individuals and families with behavioral health sciences and assists in the District’s encampment protocol. Mobile Crisis provides crisis intervention and stabilization services to residents and visitors who are experiencing psychiatric crisis in the community or at home; services include linkage to DBH psychoeducation, treatment compliance support, and grief and loss services to individuals after a traumatic event;
- **Forensics** – provides and oversees continuum of behavioral health and others services for justice-involved individuals from pre-arrest to post-incarceration to ensure their successful return to the community;
- **Disaster Behavioral Health and Support Services** – oversees the agency’s disaster response for the city; supports disaster planning and response throughout the District by participating in disaster planning and response events held by local and federal partners to ensure that behavioral health needs are addressed in disaster events; develops and maintains the agency’s Continuity of Operations Plan (COOP); serves as the Behavioral Health Liaison for MPD’s Crisis Intervention Officer program; and
- **Assessment and Referral Center (ARC)**– a walk-in Clinic, comprised of multi-disciplinary team of medical and behavioral health professionals, which provides assessment and referral service for those seeking treatment for Substance Use Disorders (SUD). The ARC also provides COVID rapid testing at the point of care for those seeking SUD treatment.

Adult/Transitional Youth Services Administration – develops, implements and monitors a comprehensive array of prevention, early intervention and community-based behavioral health services and supports for children, youth, and their families that are culturally and linguistically competent; and supports resiliency, recovery and overall well-being for District residents who have mental health and substance use disorders.

This division contains the following 15 activities:

- **Behavioral Health Services MH/SUD** – oversees development, implementation and monitoring of a comprehensive array of community-based mental health and substance use disorders services including evidenced-based and promising practices, implemented within the behavioral health provider network to address the needs of adults, youth, and their families.
- **Provider Relations** –provides oversight, technical assistance and training to enhance the success and effectiveness of DBH’s certified behavioral health provider network, monitors provider performance, ensures delivery of quality service, on-boards new providers and manages provider closures;
- **Co-Located Services** – oversees the co-location of DBH clinicians at various District government agencies and community-based sites to conduct behavioral health screenings, assessments, consultations, and to make referrals to the provider network;

- **Residential Support and Continuity of Services** –determines individuals’ housing needs and level of support; provides referrals to landlords; assures properties are inspected and approved; monitors service provision according to individualized clinical treatment plans; assures coordination and resolves problems among landlords, tenants, and providers; and conducts regular reviews to transition individuals to more independent, least restrictive community-based settings of their choice when appropriate;
- **Housing Support Services** – develops housing options and administers associated policies and procedures governing eligibility, access to housing, and issues vouchers for eligible individuals with behavioral health diagnoses; monitors providers’ compliance with contracts and provides technical assistance to providers on the development of corrective action plans; and develops and monitors grant agreements pertaining to housing development and the funding of housing vouchers;
- **Community Response Team** – a 24 hour, 7 days a week multi-disciplinary community-based team which offers services to individuals and communities experiencing psychiatric emergencies, trauma, grief, mental health issues, or substance use disorders;
- **State Opioid Response Program** – The District’s State Opioid Response focuses reducing opioid-related deaths by increasing access to medication-assisted treatment (MAT), reducing unmet treatment needs through the provision of prevention, treatment, and recovery support services (RSS) to individuals with opioid use disorder (OUD). Expanded services and supports are also provided to individuals with stimulant use disorders (STUD);
- **Assessment and Referral Center** – is a walk-in Clinic, comprised of multi-disciplinary team of medical and behavioral health professionals, which provides assessment and referral service for those seeking treatment for Substance Use Disorders (SUD). The ARC also provides COVID rapid testing at the point of care for those seeking SUD treatment;
- **Access Helpline** – a 24 hour / 7 days a week, Mental Health Crisis Hotline which fields calls from the National Suicide Prevention Lifeline, provides on the spot crisis counseling, enrollment and authorizations to care, as well as dispatching Crisis and Outreach teams to individuals in the community as needed;
- **Specialty Services** – develops, implements, and ensures sustainability of specialized and evidence-based behavioral health programs for adults, adolescents, transition-aged youth, children, and their families;
- **Substance Use Disorder Treatment Services** –monitors service provision according to individualized clinical treatment plans; assures coordination and resolves problems among landlords, tenants, and providers; and conducts regular reviews to transition individuals to more independent;
- **Mental Health Rehabilitation Services (MHRS) Local Only** –provides local funding for the payment of claims to providers for District residents who receive mental health rehabilitation services who are not eligible for Medicaid;
- **Behavioral Health Rehab - Local Match** – Medicaid match for paid claims submitted by providers for District residents who are Medicaid-eligible and receive mental health and substance use disorder services that are funded by Medicaid; and
- **Gambling Addiction Treatment and Research** – provides support services for the prevention, treatment, and research of gambling addictions; and
- **Implementation of Drug Treatment Choice** – provides subsidies and transfers for substance use disorder treatment services only.

Child/Adolescent/Family Services – develops, implements and monitors a comprehensive array of prevention, early intervention and community-based behavioral health services and supports for children, youth, and their families that are culturally and linguistically competent; and supports resiliency, recovery and overall well-being for District residents who have mental health and substance use disorders.

This division contains the following 8 activities:

- **Child/Adolescent/Family Services Administration** –develops, implements and monitors a comprehensive array of prevention, early intervention and community-based behavioral health services and supports for children, youth, and their families that are culturally and linguistically competent; and supports resiliency, recovery and overall well-being for District residents who have mental health and substance use disorders;
- **Behavioral Health Services MH/SUD** – oversees development, implementation and monitoring of a comprehensive array of community-based mental health and substance use disorders services including evidenced-based and promising practices, implemented within the behavioral health provider network to address the needs of adults, children, youth, and their families. Leads the oversight and management of the agency’s integrated community-based, prevention, early intervention, and specialty behavioral health programs;
- **SUD Prevention and Treatment** –ensures comprehensive prevention systems by developing policies, programs, and services to prevent the onset of illegal drug use, prescription drug misuse and abuse, alcohol misuse, and abuse, and underage alcohol and tobacco use. Oversees the provision of substance use treatment for children and adolescents and transition-aged youth by ASTEP providers;
- **School Based Behavioral Health Services** – provides school-based, primary prevention services to students and school staff, early intervention and treatment services to students and parents, and consultation to individual teachers and school administrators;
- **Crisis Services**– through a contract provide crisis intervention and stabilization services to residents and visitors who are experiencing psychiatric crisis in the community or at home; services include linkage to DBH, psycho education, treatment compliance support, and grief and loss services to individuals after a traumatic event;
- **Court Assessment** – provides the Superior Court of the District of Columbia with court-ordered, high-quality, comprehensive, and culturally competent mental health consultation, and psychological and psychiatric evaluations, for children and related adults with involvement in child welfare, juvenile justice, and family court;
- **Early Childhood Services** – provides in home and center-based early childhood mental health supports and child and family-centered consultation to child development center staff and families to build their skills and capacity to promote social/emotional development and to prevent, identify, and respond to mental health issues among children in their care; and
- **Specialty Services** – provides centralized coordination and monitoring of placement, continued stay, and post-discharge of children and youth in psychiatric residential treatment facilities (PRTF). Oversees the coordination of the PRTF medical necessity review process. Supports Juvenile Court by providing JBDP and HOPE Court Juvenile Behavioral Diversion Program and Hope Court that conduct mental health and substance use disorder screening, assessments, and referrals for youth, and families involved with the courts ensuring they have easy access to a full continuum of quality behavioral health services and supports. DC MAP-Through contract support the provision of screening and psychiatric consultation in pediatric practices. Co-Located Services: Oversees the co-location of DBH clinician at CFSA to facilitate early behavioral health screenings, assessments, and consultations with CFSA social work staff and to make service referrals to the behavioral health provider network.

Policy, Planning, and Evaluation Administration– aggregates and analyses data to evaluate performance; develops strategic plans and programmatic regulations, policies and procedures; develops and implements learning opportunities to advance system change; identifies needs, resources and strategies to improve performance.

This division contains 3 activities:

- **Strategic Planning and Policy** –develops programmatic regulations, policies and procedures to support the agency’s mission and direction from executive leadership; supports the development and implementation of the agencies strategic goals and priorities;

- **Training Institute** –enhances the knowledge and competencies of the DBH provider network, and internal and external customers, through performance-based and data-driven learning environments and activities; and
- **Behavioral Health Block Grant Program** –leads development, implementation, and annual reporting on the Mental Health Block Grant and the Substance Abuse Block Grant; manages the agency’s process for identifying and responding to federal grant opportunities; and provides ongoing support to the Behavioral Health Planning Council.

Adult/Transitional Youth Services - develops, implements and monitors a comprehensive array of mental health and substance abuse services, supports for adults and transitional youth, to support resiliency, recovery and overall well-being for District residents who have mental health and substance use disorders.

This administration contains the following 13 divisions:

- **Behavioral Health Services MH/SUD** – oversees development, implementation and monitoring of a comprehensive array of community-based mental health and substance use disorders services including evidenced-based and promising practices, implemented within the behavioral health provider network to address the needs of adults, youth, and their families;
- **Provider Relations** -provides oversight, technical assistance and training to enhance the success and effectiveness of DBH’s certified behavioral health provider network; monitors provider performance, ensures delivery of quality services, on-boards new providers and manages provider closures;
- **Co-located Services** - Oversees the co-location of DBH clinicians at various District government agencies and community-based sites to conduct behavioral health screenings, assessments, consultations, and to make referrals to the provider network;
- **Residential Support Services and Care Continuity** – determines individuals’ housing needs and level of support; provides referrals to landlords; assures properties are inspected and approved; monitors service provision according to individualized clinical treatment plans; assures coordination and resolves problems among landlords, tenants, and providers; and conducts regular reviews to transition individuals to more independent, least restrictive community-based settings of their choice when appropriate;
- **Housing Support Service** - develops housing options and administers associated policies and procedures governing eligibility, access to housing, and issues vouchers for eligible individuals with behavioral health diagnoses; monitors providers’ compliance with contracts and provides technical assistance to providers on the development of corrective action plans; and develops and monitors grant agreements pertaining to housing development and the funding of housing vouchers;
- **Community Response Team (CRT)** – a 24 hour, 7 days a week multi-disciplinary community-based team which offers services to individuals and communities experiencing psychiatric emergencies, trauma, grief, mental health issues, or substance use disorders;
- **State Opioid Response (SOR) Team** – The District’s State Opioid Response focuses reducing opioid-related deaths by increasing access to medication-assisted treatment (MAT), reducing unmet treatment needs through the provision of prevention, treatment, and recovery support services (RSS) to individuals with opioid use disorder (OUD). Expanded services and supports are also provided to individuals with stimulant use disorders (STUD);
- **Assessment and Referral Center (ARC)** –is a walk-in Clinic, comprised of multi-disciplinary team of medical and behavioral health professionals, which provides assessment and referral service for those seeking treatment for Substance Use Disorders (SUD). The ARC also provides COVID rapid testing at the point of care for those seeking SUD treatment;
- **Access Helpline** - a 24 hour / 7 days a week, Mental Health Crisis Hotline which fields calls from the National Suicide Prevention Lifeline, provides on the spot crisis counseling, enrollment and authorizations to care, as well as dispatching Crisis and Outreach teams to individuals in the community as needed;
- **Specialty Services** - develops, implements, and ensures sustainability of specialized and evidence-based behavioral health programs for adults, adolescents, transition-aged youth, children, and their families. (6613) Substance Use Disorder Treatment Svcs: provides subsidies and transfers for substance use disorder treatment services only;

- **Mental Health Rehabilitation Services (MHRS) Local Only** – provides local funding for the payment of claims to providers for District residents who receive mental health rehabilitation services who are not eligible for Medicaid;
- **Behavioral Health Rehabilitation Services. Local Match** - Medicaid match for paid claims submitted by providers for District residents who are Medicaid-eligible and receive mental health and substance use disorder services that are funded by Medicaid; and
- **Gambling Addiction Treatment & Research** - provides support services for the prevention, treatment, and research of gambling addictions.

Child/Adolescent/Family Services Division - Develops, implements and monitors a comprehensive array of prevention, early intervention and community-based behavioral health services and supports for children, youth, and their families that are culturally and linguistically competent; and supports resiliency, recovery and overall well-being for District residents who have mental health and substance use disorders.

This division contains the following 7 activities:

- **Child/Adolescent/Family Services Administration** - Develops, implements, and monitors a comprehensive array of prevention, early intervention, and community-based behavioral health services and supports for children, youth, and their families that are culturally and linguistically competent; and supports resiliency, recovery and overall well-being for District residents who have mental health and substance use disorders;
- **Behavioral Health Services - MH/SUD:** Oversees development, implementation, and monitoring of a comprehensive array of community-based mental health and substance use disorders services, including evidence-based and promising practices, implemented within the behavioral health provider network to address the needs of adults, children, youth, and their families. Leads the oversight and management of the agency's integrated community-based, prevention, early intervention, and specialty behavioral health programs;
- **SUD Prevention and Treatment** - Ensures comprehensive prevention systems by developing policies, programs, and services to prevent the onset of illegal drug use, prescription drug misuse and abuse, alcohol misuse, and abuse, and underage alcohol and tobacco use. Oversees the provision of substance use treatment for children and adolescents and transition-aged youth by ASTEP providers;
- **School-Based Behavioral Health Services** - Provides school-based, primary prevention services to students and school staff, early intervention and treatment services to students and parents, and consultation to individual teachers and school administrators;
- **Court Assessment: (Assessment Center)** - Provides the Superior Court of the District of Columbia with court-ordered, high-quality, comprehensive, and culturally competent mental health consultation, and psychological and psychiatric evaluations, for children and related adults with involvement in child welfare, juvenile justice, and family court;
- **Early Childhood Services** - Provides in-home and center-based early childhood mental health supports and child and family-centered consultation to child development center staff and families to build their skills and capacity to promote social/emotional development and to prevent, identify, and respond to mental health issues among children in their care; and
- **Specialty Services: Psychiatric Residential Treatment Facility (PRTF)** – provides centralized coordination and monitoring of placement, continued to stay, and post-discharge of children and youth in psychiatric residential treatment facilities (PRTF). Oversees the coordination of the PRTF medical necessity review process. Supports Juvenile Court by providing JBDP and HOPE Court Juvenile Behavioral Diversion Program and Hope Court that conduct mental health and substance use disorder screening, assessments, and referrals for youth, and families involved with the courts ensuring they have easy access to a full continuum of quality behavioral health services and supports. DC MAP-Through contract supports the provision of screening and psychiatric consultation in pediatric practices. Co-Located Services: Oversees the co-location of DBH clinicians at CFSA to facilitate early behavioral health screenings, assessments, and consultations with CFSA social work staff and make service referrals to the behavioral health provider network.

Policy Planning and Evaluation Administration Policy, Planning, & Evaluation Administration—aggregates and analyses data to evaluate performance; develops strategic plans and programmatic regulations, policies and procedures; develops and implements learning opportunities to advance system change; identifies needs, resources and strategies to improve performance.

This administration contains the following 3 divisions:

- **Strategic Planning and Policy**—develop programmatic regulations, policies, and procedures to support the agency’s mission and direction from executive leadership; supports the development and implementation of the agencies strategic goals and priorities;
- **Training Institute** – enhances the knowledge and competencies of the DBH provider network, and internal and external customers, through performance-based and data-driven learning environments and activities; and
- **Behavioral Health Block Grants Program** – leads the development, implementation, and annual reporting on the Mental Health Block Grant and the Substance Abuse Block Grant; manages the agency’s process for identifying and responding to federal grant opportunities, and provides ongoing support to the Behavioral Health Planning Council.

Agency Management – provides for administrative support and the required tools to achieve operational and programmatic results. This division is standard for all agencies using performance-based budgeting.

Agency Financial Operations – provides comprehensive and efficient financial management services to, and on behalf of, District agencies so that the financial integrity of the District of Columbia is maintained. This division is standard for all agencies using performance-based budgeting.

Division Structure Change

The approved program/division structure changes are provided in the Agency Realignment appendix to the approved budget, which is located at www.cfo.dc.gov on the Annual Operating Budget and Capital plan page.

FY 2021 Approved Budget to FY 2022 Approved Budget, by Revenue Type

Table RM0-5 itemizes the changes by revenue type between the FY 2021 approved budget and the FY 2022 approved budget. For a more comprehensive explanation of changes, please see the FY 2022 Approved Budget Changes section, which follows the table.

Table RM0-5

(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
LOCAL FUNDS: FY 2021 Approved Budget and FTE		272,004	1,228.2
Removal of One-Time Costs	Multiple Programs	-575	0.0
LOCAL FUNDS: FY 2022 Recurring Budget		271,429	1,228.2
Create: To support operations of a new division	Adult/Transitional Youth Services	64,906	71.1
Create: To support operations of a new division	Child/Adolescent/Family Services	47,951	98.2
Increase: To align personal services and Fringe Benefits with projected costs	Multiple Programs	1,880	-12.6
Increase: To support the costs of pre-existing programmatic initiatives	St. Elizabeths Hospital	455	0.0
Decrease: To align Fixed Costs with proposed estimates	Multiple Programs	-394	0.0
Decrease: To realize savings in nonpersonal services	Multiple Programs	-3,579	0.0
Decrease: Division eliminated to support new organizational structure	System Transformation	-4,807	-33.2
Decrease: Division eliminated to support new organizational structure	Community Services	-109,504	-130.0

Table RM0-5

(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
Enhance: To support School-based Expansion	Child/Adolescent/Family Services	5,838	0.0
Enhance: To align budget with certified actuarial projections (one-time)	Adult/Transitional Youth Services	4,300	0.0
Enhance: To support DBH's Voucher Program (Home First Program)	Multiple Programs	2,673	0.0
Enhance: To support Sobering and Stabilization Center, CPEP Expansion and MPD Crisis Response Training	Multiple Programs	1,819	6.0
Enhance: To support the Sobering and Stabilization Center (one-time)	Adult/Transitional Youth Services	761	0.0
Enhance: To support the Community Residence Program and rental subsidies	Adult/Transitional Youth Services	599	0.0
Enhance: To support the Wayne Place Transitional Housing program (one-time)	Adult/Transitional Youth Services	444	0.0
Enhance: To support Building Blocks DC, 911 Diversion, and the development of Co-responder Model with MPD	Behavioral Health Authority	354	2.0
Enhance: Funding to Support the Maintenance and Facilities Budget (one-time)	St. Elizabeths Hospital	250	0.0
Enhance: To adjust the Contractual Services budget	Behavioral Health Authority	113	0.0
LOCAL FUNDS: FY 2022 Mayor's Proposed Budget		285,486	1,229.8
Enhance: To support the SBMH program expansion for community-based providers (one-time)	Child/Adolescent/Family Services	1,873	0.0
Enhance: To support the Healthy Futures program	Child/Adolescent/Family Services	416	0.0
Reduce: To realize savings in nonpersonal services	Adult/Transitional Youth Services	-416	0.0
LOCAL FUNDS: FY 2022 District's Approved Budget		287,359	1,229.8
DEDICATED TAXES: FY 2021 Approved Budget and FTE		200	0.0
Create: To support operations of a new division	Adult/Transitional Youth Services	200	0.0
Decrease: Division eliminated to support new organizational structure	Community Services	-200	0.0
DEDICATED TAXES: FY 2022 Mayor's Proposed Budget		200	0.0
No Change		0	0.0
DEDICATED TAXES: FY 2022 District's Approved Budget		200	0.0
FEDERAL PAYMENTS: FY 2021 Approved Budget and FTE		0	0.0
Enhance: ARPA – State Funding to support Learning Acceleration, Health and Alternatives to Policing	Multiple Programs	10,221	65.0
FEDERAL PAYMENTS: FY 2022 Mayor's Proposed Budget		10,221	65.0
Reduce: Errata item to accurately reflect total number of FTEs	St. Elizabeths Hospital	0	-10.0
FEDERAL PAYMENTS: FY 2022 District's Approved Budget		10,221	55.0
FEDERAL GRANT FUNDS: FY 2021 Approved Budget and FTE		15,135	77.6
Create: To support operations of a new division	Adult/Transitional Youth Services	30,160	36.6
Create: To support operations of a new division	Child/Adolescent/Family Services	91	0.6
Increase: To align budget with projected grant awards	Multiple Programs	1,605	0.0
Decrease: To align personal services and Fringe Benefits with projected costs	Multiple Programs	-360	-4.9
Decrease: Division eliminated to support new organizational structure	System Transformation	-1,848	-2.6
Decrease: Division eliminated to support new organizational structure	Community Services	-5,930	-18.6
FEDERAL GRANT FUNDS: FY 2022 Mayor's Proposed Budget		38,853	88.6
No Change		0	0.0
FEDERAL GRANT FUNDS: FY 2022 District's Approved Budget		38,853	88.6

Table RM0-5

(dollars in thousands)

DESCRIPTION	DIVISION/PROGRAM	BUDGET	FTE
FEDERAL MEDICAID PAYMENTS: FY 2021 Approved Budget and FTE		2,991	5.0
Increase: To align the budget with projected federal Medicaid Reimbursements	Multiple Programs	75	0.0
Decrease: Division eliminated to support new organizational structure	System Transformation	-208	-1.0
FEDERAL MEDICAID PAYMENTS: FY 2022 Mayor's Proposed Budget		2,858	4.0
No Change		0	0.0
FEDERAL MEDICAID PAYMENTS: FY 2022 District's Approved Budget		2,858	4.0
 PRIVATE GRANT FUNDS: FY 2021 Approved Budget and FTE		 446	 0.0
Increase: To align budget with projected grant awards	Multiple Programs	187	0.0
Decrease: Division eliminated to support new organizational structure	Community Services	-44	0.0
Decrease: Division eliminated to support new organizational structure	System Transformation	-147	0.0
Create: To support operations of a new division	Adult/Transitional Youth Services	44	0.0
PRIVATE GRANT FUNDS: FY 2022 Mayor's Proposed Budget		486	0.0
No Change		0	0.0
PRIVATE GRANT FUNDS: FY 2022 District's Approved Budget		486	0.0
 PRIVATE DONATIONS: FY 2021 Approved Budget and FTE		 161	 0.0
No Change		0	0.0
PRIVATE DONATIONS: FY 2022 Mayor's Proposed Budget		161	0.0
No Change		0	0.0
PRIVATE DONATIONS: FY 2022 District's Approved Budget		161	0.0
 SPECIAL PURPOSE REVENUE FUNDS: FY 2021 Approved Budget and FTE		 2,650	 16.2
Increase: To align budget with projected revenues	Multiple Programs	37	0.0
SPECIAL PURPOSE REVENUE FUNDS: FY 2022 Mayor's Proposed Budget		2,687	16.2
No Change		0	0.0
SPECIAL PURPOSE REVENUE FUNDS: FY 2022 District's Approved Budget		2,687	16.2
 INTRA-DISTRICT FUNDS: FY 2021 Approved Budget and FTE		 14,059	 68.9
Decrease: To align budget with projected revenues	Multiple Programs	-749	-7.9
INTRA-DISTRICT FUNDS: FY 2022 Mayor's Proposed Budget		13,310	61.0
No Change		0	0.0
INTRA-DISTRICT FUNDS: FY 2022 District's Approved Budget		13,310	61.0
 GROSS FOR RM0 - DEPARTMENT OF BEHAVIORAL HEALTH		 356,135	 1,454.6

(Change is calculated by whole numbers and numbers may not add up due to rounding)

FY 2022 Approved Operating Budget Changes

Table RM0-6 contains the approved FY 2022 budget by fund compared to the FY 2021 approved budget.

Table RM0-6

Appropriated Fund	FY 2021 Approved	FY 2022 Approved	% Change from FY 2021
Local Funds	\$272,004,364	\$287,359,072	5.6
Dedicated Taxes	\$200,000	\$200,000	0.0
Federal Payments	\$0	\$10,220,786	N/A
Federal Grant Funds	\$15,134,620	\$38,852,910	156.7
Federal Medicaid Payments	\$2,991,414	\$2,857,676	-4.5
Private Grant Funds	\$446,290	\$486,290	9.0
Private Donations	\$161,153	\$161,153	0.0
Special Purpose Revenue Funds	\$2,650,320	\$2,686,962	1.4
Intra-District Funds	\$14,059,343	\$13,310,098	-5.3
GROSS FUNDS	\$307,647,505	\$356,134,948	15.8

Recurring Budget

The FY 2022 Budget for DBH includes a reduction of \$575,000 to account for the removal of one-time funding appropriated in FY 2021. The funding was comprised of \$500,000 to support school based mental health and \$75,000 to support maintenance and facilities.

Mayor's Proposed Budget

The Department of Behavioral Health (DBH) will undergo an organizational structure change in its proposed budget submission to better serve the citizens of the District of Columbia. In doing so, the agency will add the Adult Transitional Youth Services (ATYS) and Child, Adolescent, and Family Services (CAFS) divisions, while eliminating the Community Services and System Transition divisions. The ATYS division will operate through 15 activities, and the CAFS division will operate through 8 activities. Among many objectives, the agency will focus on developing, implementing, and monitoring a wide array of behavioral health and substance abuse services. There will also be early intervention programs and community-based behavioral health services for a multitude of ages and demographics. These actions support the agency's vision of supporting a thriving community where prevention is possible and recovery from behavioral health and substance abuse disorders is the expectation. These structural changes will support the budgetary adjustments below:

Create: In Local funds, the newly formed ATYS division will be comprised of \$64,905,601 and 71.1 Full-Time Equivalents (FTEs), and the CAFS division will be comprised of \$47,951,498 and 98.2 FTEs.

In addition, in Federal Grant funds, the ATYS division will be supported by \$30,160,017 and 36.6 FTEs, and the CAFS division will be supported by \$91,249 and 0.6 FTEs.

Lastly, \$200,000 in Dedicated Tax funds and \$43,982 in Private Grant funds will be used to support the creation of the ATYS division.

Increase: In the budget submission for DBH, a proposed Local funds increase of \$1,880,489 and a reduction of 12.6 FTEs across multiple programs will allow the agency to properly align the personal services and Fringe Benefits with projected costs. The other increase of \$455,000 will be used to support operational costs within the Saint Elizabeths Hospital division.

A proposed increase of \$1,605,210 will be made across multiple divisions to align the Federal Grants budget. This funding source will primarily be used for subsidies within the Policy, Planning, and Evaluation Administration division.

A proposed increase of \$187,308 across multiple divisions in Private Grant funds is to align the budget with projected grant awards.

In Special Purpose Revenue funds, the agency proposes an increase of \$36,642 across multiple divisions to align the budget with projected resources.

In Federal Medicaid Payments, the budget is increased by \$74,759 across multiple divisions to align the proposed budget with reimbursements for qualified services.

Decrease: DBH's proposed budget submission includes several decreases in Local funds. A net savings of \$394,231 across multiple divisions is included to align the budget with fixed cost estimates from the Department of General Services and the Office of the Chief Technology Officer for Energy, Telecommunications, Rent, Security, and Occupancy. A proposed reduction of \$3,578,962 across multiple divisions is primarily due to savings in contractual obligations. Additionally in Local funds, the elimination of the System Transformation and Community Services divisions are reflected as decreases of \$4,807,457 and 33.2 FTEs, and \$109,504,477 and 130.0 FTEs respectively. These funds will be used to support the two newly created divisions.

The proposed budget for Dedicated Taxes includes a decrease of \$200,000 to reflect the elimination of the Community Services division.

In Federal Grant funds, a proposed decrease of \$360,136 and 4.9 FTEs across multiple divisions aligns the budget with projected salary and Fringe Benefit costs. Additionally in Federal Grant funds, DBH's budget proposes a decrease of \$1,847,686 and 2.6 FTEs in the System Transformation division, and a decrease of \$5,930,363 and 18.6 FTEs in the Community Services division, which will be used to support the new divisions.

In Federal Medicaid Payments, the budget proposal to eliminate the System Transformation division will result in a decrease of \$208,497 and 1.0 FTE.

In Private Grant funds, the proposed reductions of \$43,982 in the Community Services and \$147,308 in System Transformation divisions will be used to support new divisions.

In Intra-District funds, the budget includes a proposed decrease of \$749,245 and 7.9 FTEs across multiple divisions to properly align the budgets with projected revenues.

Enhance: DBH's proposed Local funds budget includes several initiatives to strengthen its mission to support prevention, treatment, resiliency, and recovery for District residents with mental health and substance use disorders through the delivery of high-quality, integrated services. The CAFS division will receive \$5,837,722 to support the School Based Expansion program. This program develops, implements, and monitors a comprehensive array of prevention, early intervention and community-based behavioral health services and supports for children, youth, and their families that are culturally and linguistically competent. The ATYS division will receive a one-time enhancement of \$4,300,000 to support the alignment of the budget with certified actual projections. Another proposed enhancement of \$2,673,000 across multiple divisions will support DBH's Voucher and Home Base programs. The budget also proposes an increase of \$1,819,299 and 6.0 FTEs to support the Sobering and Stabilization Center, the CPEP Expansion and the MPD Crisis Response Training initiative. The ATYS division will receive a one-time enhancement of \$760,550 to support the Sobering and Stabilization Center and \$598,600 to support the Community Residence Program. The ATYS division will also receive a one-time increase of \$444,000 to support the Wayne Place Transitional Housing program. The Behavioral Health Authority division will receive \$353,546 and 2.0 FTEs to assist with the Building Blocks DC initiative, 911 Diversion, and the development of the Co-Responder model with the Metropolitan Police Department. An additional one-time enhancement of \$250,000 for St. Elizabeths Hospital is proposed to support maintenance and facilities costs. Lastly, an enhancement of \$112,730 in the Behavioral Health Authority division is to support Contractual Services with the Office of Contracting and Procurement.

DBH's proposed Federal Payment budget includes \$10,220,785 and 65.0 FTEs in ARPA – State funds, of which \$5,074,126 and 41.0 FTEs is to expand Access Helpline Staffing, CRT expansion and upgrade, and IT services to track outcomes; \$2,680,000 is to expand telehealth services; and \$1,148,000 and 20.0 FTEs is to support Intensive Care Coordination teams designed to improve behavioral health outcomes. This adjustment also includes \$544,471 and 1.0 FTE to fund the agency's weekly Wellness Wednesday workshops; \$480,412 and 2.0 FTEs to expand the DBH "Health Futures" program; and \$293,777 and 1.0 FTE to provide mental health support to District teachers and staff. This increase in spending is supported by Coronavirus Relief funds from the American Rescue Plan Act.

District's Approved Budget

Enhance: The approved Local funds budget for the Department of Behavioral Health reflects a one-time funding increase of \$1,872,800 to the Child/Adolescent/Family Services division to support the School-Based Mental Health (SBMH) program expansion by providing additional payments to community-based providers. This division will also increase by \$416,134 in Local funds to support the District's Healthy Futures program.

Reduce: The approved Local funds budget contains a reduction of \$416,134 to the Adult/Transition Youth Services division to adjust for contractual efficiencies and other nonpersonal services adjustments.

In Federal Payments, the approved budget reflects a reduction of 10.0 FTEs as an errata adjustment to properly align the personal services budget.

Agency Performance Plan*

The Department of Behavioral Health (DBH) has the following strategic objectives for FY 2022:

Strategic Objectives

Strategic Objectives describe what the agency will do, at a high level, to achieve its mission. These are action-based sentences that define what an agency does for its customers, whether the customers are residents or other District agencies, and how that improves the District.

Objectives

1. Transform the District's behavioral health system into a nationally recognized, results-based model of care by promoting a common vision, accountable collective action, transparency, and innovative programs.
2. Ensure individuals served at Saint Elizabeth's Hospital receive quality services to meet their unique needs.
3. Ensure individuals and families receive quality services to meet their unique needs, resulting in access to the right services, at the right time, in the right amount.
4. Build and support a community that promotes recovery and resilience to help individuals and families thrive.
5. Promote behavioral health wellness through prevention and early intervention services and supports.
6. Strengthen community partnerships to better integrate and coordinate services towards a sustained shared vision of excellence
7. Create and maintain a highly efficient, transparent, and responsive District government.

ACTIVITIES

Activities include the work that happens on a daily basis to help achieve the Strategic Objectives. Activity names come from the budget line items. This is further divided into "daily services" (ex. sanitation disposal), and long-term "key projects" that are high profile, one-time and span several years, (ex. redevelopment of Walter Reed Army Medical Center). Many agencies will mostly have daily services, whereas some agencies that have more of their budget come from capital funding will have several key projects.

1. Transform the District's behavioral health system into a nationally recognized, results-based model of care by promoting a common vision, accountable collective action, transparency, and innovative programs. (3 Activities)

Activity Title	Activity Description	Type of Activity
Training	Conduct web-based and classroom trainings for providers, DBH staff, and community members.	Daily Service
Provider certification and licensure	Certify and recertify behavioral health providers, and license and relicense community residential facilities.	Daily Service
Accountability, quality, compliance monitoring, technical assistance	Audit claims; provide data reports and analysis; issue performance improvement plans; provide technical assistance to providers.	Daily Service

2. Ensure individuals served at Saint Elizabeth's Hospital receive quality services to meet their unique needs. (3 Activities)

Activity Title	Activity Description	Type of Activity
Quality Inpatient Care	Provide quality treatment to individuals in care at Saint Elizabeths Hospital	Daily Service
Transition to community	Work with the community behavioral health network to ensure individuals being discharged from Saint Elizabeths Hospital have a successful transition back to the community.	Daily Service
Safety	Ensure the safety of individuals and staff at Saint Elizabeth's Hospital.	Daily Service

3. Ensure individuals and families receive quality services to meet their unique needs, resulting in access to the right services, at the right time, in the right amount. (7 Activities)

Activity Title	Activity Description	Type of Activity
Mental Health Treatment for Children and Youth	Provide community-based treatment and supportive services to children, youth and young adults who have a serious mental illness or serious emotional disorder to assist them in recovery.	Daily Service
Forensic Monitoring	Monitor consumers who have a legal status of committed outpatient and ensure they are complying with court orders.	Daily Service
Housing	Provide housing vouchers, connect consumers to community residential facilities, and provide clinical support to consumers receiving housing services	Daily Service
Crisis Services	Provide Immediate interventions to individuals in crisis.	Daily Service
Substance use and treatment for youth	Provide treatment and recovery services for young adult substance use disorder clients to help them achieve and maintain their recovery.	Daily Service
Substance Use Treatment for Adults	Provide treatment and recovery services for adult substance use disorder clients to help them achieve and maintain their recovery.	Daily Service
Mental Health Treatment for adults	Provide community-based treatment services to adults who have a serious mental illness in order to assist them in their recovery.	Daily Service

4. Build and support a community that promotes recovery and resilience to help individuals and families thrive. (2 Activities)

Activity Title	Activity Description	Type of Activity
Peer Specialists and Recovery Coaches	Train peer specialists and recovery coaches.	Daily Service
Consumer and Family Affairs	Ensure the involvement of consumers of behavioral health services and their family members in the design, implementation and evaluation of behavioral health services.	Daily Service

5. Promote behavioral health wellness through prevention and early intervention services and supports. (5 Activities)

Activity Title	Activity Description	Type of Activity
Outreach Services	Conduct outreach in the community to reach individuals in need of immediate support and connection to treatment.	Daily Service
Prevention interventions	Conduct strategic preventive interventions aimed at preventing and/or delaying the onset of alcohol, tobacco, and other drug use among youth and adults.	Daily Service
COMMUNICATION	Develop and implement communication strategies to promote recovery and wellbeing.	Daily Service
EARLY INTERVENTIONS	Provide individual and group interventions to children.	Daily Service
SCHOOL MENTAL HEALTH SERVICES	Provide individual and group interventions in school settings	Daily Service

6. Strengthen community partnerships to better integrate and coordinate services towards a sustained shared vision of excellence (3 Activities)

Activity Title	Activity Description	Type of Activity
Care Coordination	Track admissions, discharges, and follow-up services to/from community inpatient psychiatric hospitals, withdrawal management, and SUD residential treatment.	Daily Service
Authorization and Linkage to Services	Authorize and connect consumers in order to provide services.	Daily Service
Provider Partnership	Strengthen community partnerships to better integrate and coordinate services towards a sustained shared vision of excellence	Daily Service

KEY PERFORMANCE INDICATORS

Key Performance Indicators measure how well an agency is achieving its Strategic Objectives. They are outcome-oriented and should be used to answer the question, “What does the agency need to measure to determine success?”

1. Transform the District’s behavioral health system into a nationally recognized, results-based model of care by promoting a common vision, accountable collective action, transparency, and innovative programs. (1 Measure)

Measure	New Measure/ Benchmark Year	FY 2019 Actual	FY 2020 Target	FY 2020 Actual	FY 2021 Target	FY 2022 Target
Percent of individuals referred through the emergency department medication assisted treatment programs who went to treatment.	No	New in 2021	New in 2021	New in 2021	New in 2021	50%

2. Ensure individuals served at Saint Elizabeth’s Hospital receive quality services to meet their unique needs. (5 Measures)

Measure	New Measure/ Benchmark Year	FY 2019 Actual	FY 2020 Target	FY 2020 Actual	FY 2021 Target	FY 2022 Target
Percent of consumers who completed competency restoration program who were found competent	No	New in 2020	New in 2020	62.1%	75%	75%

2. Ensure individuals served at Saint Elizabeth's Hospital receive quality services to meet their unique needs. (5 Measures)

Measure	New Measure/ Benchmark Year	FY 2019 Actual	FY 2020 Target	FY 2020 Actual	FY 2021 Target	FY 2022 Target
Percent of individuals from Saint Elizabeths Hospital readmitted within 90 days	No	New in 2020	New in 2020	0.9%	2%	2%
Percent of patients satisfied with Facility/Environment	No	New in 2021	New in 2021	New in 2021	New in 2021	80%
Percent of unique patients restrained at least once.	No	New in 2021	New in 2021	New in 2021	New in 2021	No Target Set
Percent of unique patients secluded at least once	No	New in 2021	New in 2021	New in 2021	New in 2021	4.4%

3. Ensure individuals and families receive quality services to meet their unique needs, resulting in access to the right services, at the right time, in the right amount. (7 Measures)

Measure	New Measure/ Benchmark Year	FY 2019 Actual	FY 2020 Target	FY 2020 Actual	FY 2021 Target	FY 2022 Target
Percent of MAT clients who were served in two consecutive quarters	No	New in 2020	New in 2020	87.1%	90%	90%
Percent of Substance Use Disorder (SUD) clients who were successfully discharged that re-entered services within 90 days	No	New in 2021	New in 2021	New in 2021	New in 2021	25%
Percent of adults newly enrolled in Mental Health Rehabilitative Services (MHRS) services who had their first clinical service within 30 days of enrollment	No	82.1%	75%	82.1%	85%	85%
Percent of children newly enrolled in Mental Health Rehabilitative Services (MHRS) services who had their first clinical service within 30 days of enrollment	No	73.1%	75%	74.2%	85%	85%
Percent of children receiving mental health services whose acuity was initially high who had significant improvement in functioning on their most recent functional assessment	No	New in 2020	New in 2020	58.9%	80%	80%
Percent of consumers who remained in the Community Residential Facility (CRF) placement for at least 90 days from move-in date, with no psychiatric hospitalizations, incarcerations, crisis bed placements, or involuntary discharges	No	New in 2020	New in 2020	86.2%	90%	90%
Percent of consumers/clients satisfied with Access	No	New in 2021	New in 2021	New in 2021	New in 2021	80%

4. Build and support a community that promotes recovery and resilience to help individuals and families thrive. (2 Measures)

Measure	New Measure/ Benchmark Year	FY 2019 Actual	FY 2020 Target	FY 2020 Actual	FY 2021 Target	FY 2022 Target
Percent of consumers surveyed in the Behavioral Health Satisfaction Survey who were satisfied with the person-centered planning process	No	New in 2020	New in 2020	77.8%	80%	80%
Percent certified peers employed during the quarter	No	New in 2020	New in 2020	78.7%	80%	80%

5. Promote behavioral health wellness through prevention and early intervention services and supports. (2 Measures)

Measure	New Measure/ Benchmark Year	FY 2019 Actual	FY 2020 Target	FY 2020 Actual	FY 2021 Target	FY 2022 Target
Percent of school-based behavioral health partnership schools with a school based behavioral health clinician	No	New in 2020	New in 2020	82.2%	80%	80%
Percent of vendors not selling tobacco to minors	No	New in 2020	New in 2020	No Applicable Incidents	90%	90%

6. Strengthen community partnerships to better integrate and coordinate services towards a sustained shared vision of excellence (4 Measures)

Measure	New Measure/ Benchmark Year	FY 2019 Actual	FY 2020 Target	FY 2020 Actual	FY 2021 Target	FY 2022 Target
Percent of Mental Health Rehabilitative Services (MHRS) consumers who were discharged from a psychiatric hospital and had a follow-up service within 30 days	No	New in 2020	New in 2020	45.2%	50%	50%
Percent of consumers/clients who were homeless at admission who had housing at discharge	No	New in 2021	New in 2021	New in 2021	New in 2021	No Target Set
Percent of substance use disorder (SUD) residential treatment clients who stepped down to a lower level of care	No	New in 2020	New in 2020	30.3%	50%	50%
Percent of substance use disorder (SUD) withdrawal management clients who stepped down to a lower level of care	No	New in 2020	New in 2020	45.4%	20%	20%

WORKLOAD MEASURES

Workload Measures, also called inputs or outputs, quantify an activity, effort or process that is necessary to make progress towards the Strategic Objectives. They help answer the question; “How much are we doing?”

1. Quality Inpatient Care

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Average daily census of civil (non-court-involved) patients at Saint Elizabeths Hospital	No	102	124	173
Average daily census of forensic (court-involved) patients at Saint Elizabeths Hospital	No	162	146	120.3

2. Training

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of people who attend DBH Training Institute trainings	No	New in 2020	New in 2020	2883

3. Provider certification and licensure

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of Community Residential Facilities licensed	No	New in 2021	New in 2021	New in 2021
Number of providers certified	No	New in 2021	New in 2021	New in 2021

4. Accountability, quality, compliance monitoring, technical assistance

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of DC Clinicians certified to prescribe Buprenorphine that participate in the SOR Learning Community	No	New in 2021	New in 2021	New in 2021
Number of dashboards in production	No	New in 2021	New in 2021	New in 2021
Number of Technical Assistance Activities initiated	No	New in 2021	New in 2021	New in 2021

5. Transition to community

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of people discharged from Saint Elizabeths Hospital quarterly into community housing	No	New in 2020	New in 2020	266

6. Safety

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of assaults by patients on staff or other patients	No	New in 2021	New in 2021	New in 2021
Number of Staff and Patient Falls	No	New in 2021	New in 2021	New in 2021

7. Mental Health Treatment for Children and Youth

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of children, youth, and young adults (0-17) receiving mental health treatment	No	3605	3515	3252

8. Forensic Monitoring

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of Consumers in FOPD	No	New in 2021	New in 2021	New in 2021

9. Housing

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of people DBH placed in housing	No	New in 2020	New in 2020	1670

10. Crisis Services

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of People Served at 35 K Urgent Care	No	New in 2021	New in 2021	New in 2021
Number of People Served at Comprehensive Psychiatric Emergency Program (CPEP)	No	New in 2021	New in 2021	New in 2021

11. Peer Specialists and Recovery Coaches

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of new Certified Peer Specialists to include those in specialty tracks of family and youth	No	New in 2021	New in 2021	New in 2021
Number of people trained in Recovery Coaching	No	New in 2021	New in 2021	New in 2021

12. Care Coordination

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of Mental Health consumers with a psychiatric hospitalization	No	New in 2021	New in 2021	New in 2021
Number of SUD clients receiving residential services	No	New in 2021	New in 2021	New in 2021
Number of SUD clients receiving withdrawal management services	No	New in 2021	New in 2021	New in 2021

13. Authorization and Linkage to Services

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of Authorizations for Specialty Services (Assertive Community Treatment, Community Based Interventions, Supported Employment, Day Rehab)	No	New in 2021	New in 2021	New in 2021

14. Substance use and treatment for youth

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
The Number of Youth Receiving Substance Use Disorder Treatment Services	No	New in 2021	New in 2021	New in 2021

15. Provider Partnership

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of DBH projects with documented involvement of providers	No	New in 2021	New in 2021	New in 2021

16. Consumer and Family Affairs

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of individuals referred to Resiliency Specialist after a child fatality	No	New in 2020	New in 2020	No Applicable Incidents
Number of Policies, Projects, Programs, and Service in which DBH engaged with consumers/clients and their families	No	New in 2021	New in 2021	New in 2021

17. Outreach Services

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of interventions from Crisis Response Team	No	New in 2020	New in 2020	10,347

18. Substance Use Treatment for Adults

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of individuals receiving a substance use disorder (SUD) intake assessment	No	5881	4054	3586
Number of people receiving substance use disorder (SUD) treatment services	No	4825	4733	4148

19. Mental Health Treatment for adults

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of adults (18+) receiving mental health treatment	No	18,842	20,474	75,249
Number of adults receiving Health Homes services	No	1984	1467	1385

20. Prevention interventions

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of individuals (adults and youth) reached through planned substance use disorder (SUD) prevention strategies	No	New in 2020	New in 2020	12,477
Number of prevention activities by Prevention Centers	No	546	368	246

21. COMMUNICATION

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of hits to the DBH website	No	New in 2020	New in 2020	547,113
Number of public outreach events	No	628	659	721

22. EARLY INTERVENTIONS

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of child development centers participating in Healthy Futures program	No	New in 2020	New in 2020	42

23. SCHOOL MENTAL HEALTH SERVICES

Measure	New Measure/ Benchmark Year	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Number of children served by DBH SMHP	No	New in 2021	New in 2021	New in 2021

Performance Plan Endnotes:

*For more information about the structure and components of FY 2022 draft performance plans, please see the FY 2022 Approved Budget and Financial Plan, Volume 1, Appendix E.

**Key performance indicators that are new may not have historical data and may only have FY 2022 targets.

***To view the final versions of agency FY 2022 performance plans when they become available in December 2021, see the OCA website at <https://oca.dc.gov/>.